

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | J | | 05/02/01 |
| O.I.P.E. CLASSIFIER | LM | 32 | 5/18 |
| FORMALITY REVIEW | MH | 920 | 06-27-01 |
| RESPONSE FORMALITY REVIEW | DE | 907 | 10-18-01 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

6/28/01
503
10/11